

**Work Order ID 68517**

Thursday, April 14, 2011 11:48:06 AM

Page 1

Item ID: D4380-9

Accept

Revision ID: PRELIM

Item Name: Cover, LH Aft Audio

Start Date: 4/14/2011 Start Qty: 1.00

Required Date: 4/15/2011 Req'd Qty: 1.00

Reference:

Cust Item ID:

Customer:

**PRELIMINARY ISSUE**

Approvals:

Process Plan:

Date: 11-04-14

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

Stop

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool # Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

Draw Nbr

Revision Nbr

D4380

PAS

A

100

0.00

HandThermo

Memo

0.00

Hand Finishing Thermoforming

1-Cut Sheet to required Blank size

x1

DL  
11/04/14

105

0.00

HandThermo

Dry Material

Memo

0.00

Hand Finishing Thermoforming

Dry Sheet as per QS1022 Kydex

Temp: 150°C

Time IN: 4:30 PM

Time OUT: 7:00 AM

11/04/13  
11/04/14

x1

DL  
11/04/14

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

\_\_\_\_\_

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[illegible]

\_\_\_\_\_

1. The first step in the process is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.

2. Once the problem is identified, the next step is to define the objectives and goals of the project. This helps to clarify what needs to be achieved and provides a clear direction for the team.

3. The third step is to develop a plan or strategy to address the problem. This involves breaking down the problem into smaller, manageable tasks and determining the resources needed to complete each task.

4. The fourth step is to implement the plan. This involves assigning tasks to team members, setting deadlines, and monitoring progress to ensure that the project is on track.

5. The final step is to evaluate the results of the project. This involves comparing the actual outcomes with the objectives and goals to determine the effectiveness of the project and identify areas for improvement.






**Cust Item ID:**  
**Customer:**

**Reference:**

\_\_\_\_\_



Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
110 	Thermoform	0.00							
Thermoforming Machine	<b>Memo</b> 1-Machine Set-Up 2-Pre-heat Tool to required temp. 3-Thermoform as per Dwg and Folio #FTA114 using tool DT9739  Dwg Rev: <u>PA9</u> Folio Rev: <u>A</u>	0.00				X1			 11/04/14
120 	QC	0.00							
Quality Control	<b>Memo</b> Visually inspect part for proper formation and texture	0.00							 11/04/14
130 	QC	0.00							
Quality Control	<b>Memo</b> PA9 called qty 1 11/04/14 JM-03	0.00							

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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**NOTE:** Date & initial all entries

**Work Order ID 68517**

Thursday, April 14, 2011 11:48:06 AM



Page 3

Item ID: D4380-9

Accept



Setup Start



Revision ID: PRELIM

Stop



Item Name: Cover, LH Aft Audio

Start Date: 4/14/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 4/15/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140 		0.00							
HandThermo	Memo	0.00				21			OK 4/14/14
Hand Finishing Thermoforming	1-Trim to finished dimensions as per Dwg								
150 	QC2- Inspect parts off machine FAI/FAIB	0.00							
QC	Memo	0.00				21			OK 4/14/14
Quality Control	Complete FAI document								
160 	QC5- Inspect part completeness to step on W/O	0.00							
QC	Memo	0.00							
Quality Control	4/14/14 JM-03 PA9 only. Qty 1								

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries



# Picklist Print

Thursday, April 14, 2011 11:48:04 AM

Page 1

Work Order ID: 68517

Parent Item: D4380-9

Parent Item Name: Cover, LH Aft Audio



Start Date: 4/14/2011

Required Date: 4/15/2011

Start Qty: 1.00

Required Qty: 1.00

Comments: Rev. A New Issue. 11/04/04 DL verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MKYD6185S.080-P3-62015		Purchased	No			100	sf	530.6026	3.46875	3.46875			



6185 KYDEX .080"



Location

therm

Loc Qty

530.602647

530.602647

Loc Code

116576

3.46875 sq ft

u/04/14

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

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NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

<b>DART AEROSPACE LTD</b>	<b>Work Order:</b> 65817
<b>Description:</b>	<b>Part Number:</b> D4380-9
<b>Inspection Dwg:</b> D4380 <b>Rev:</b> PA9	<b>Page 1 of 1</b>

**FIRST ARTICLE INSPECTION CHECKLIST**  
**THERMOFORMING SECTION**

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than <u>2.4</u> "	✓			
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

<b>Measured by:</b> <u>DL</u>	<b>Date:</b> <u>11/04/14</u>
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**TRIMMING SECTION**

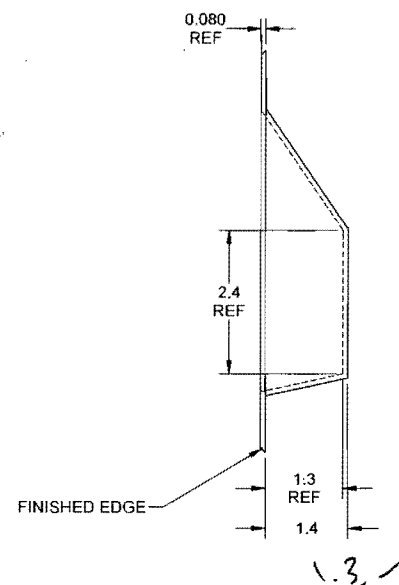
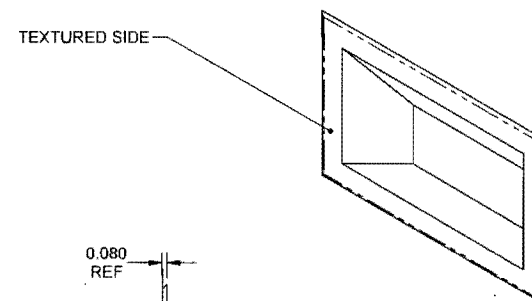
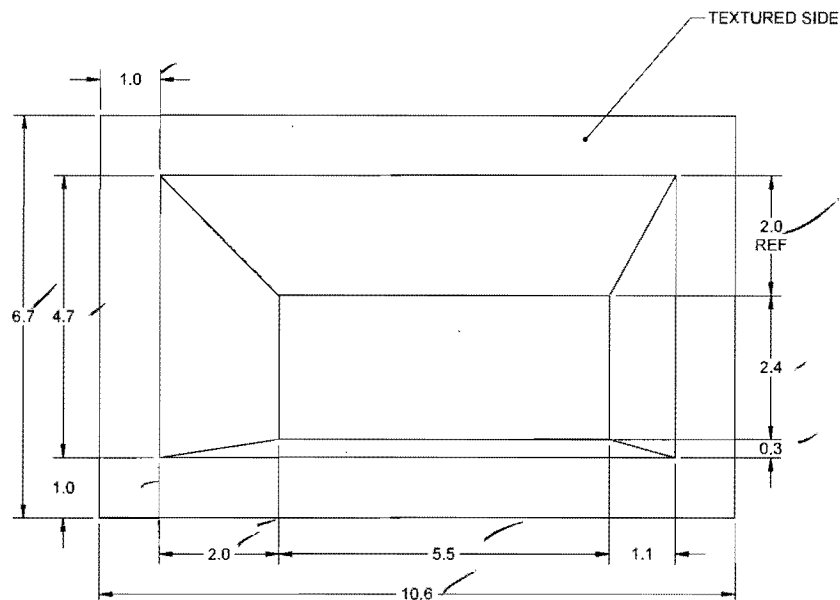
Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
10.6"	$\pm 0.100$	10.6"	✓		Tape DL-01	
6.7"	0.500	6.7"	✓		Tape DL-01	
4.7"	0.100	4.70"	✓		Vern DL-02	
5.5"	0.100	5.5"	✓		Vern DL-02	
2.4"	0.100	2.4"	✓		Ruler TH-02	
1.3"	Ref	1.258"	✓		Vern DL-02	<del>NA</del>
1.0"	$\pm 0.100$	1.03"	✓		Vern BL-02	

<b>Measured by:</b> <u>DL</u>	<b>Date:</b> <u>11/04/14</u>
<b>Audited by:</b> <u>PA9 only</u>	<b>Date:</b> <u>11/04/14</u>
<b>Preliminary Approval:</b>	<b>Date:</b>

Rev	Date	Change	Revised by	Approved
B	10.04.14	Added preliminary approval	KJ	

10.04.14





# **D4380-9 COVER, LH AFT AUDIO**

## **NOTES:**

- 1) MATERIAL: KYDEX 6185, 0.080 THICK, P3-VELOUR MATTE, IVORY #62015  
REF DART SPEC MKYD6185S.080-P3-62015
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.24 lbs
- 8) MINIMUM ALLOWABLE THICKNESS AFTER THERMOFORMING = 0.040
- 9) TOOLING: THERMOFORM -9 PART PER MOULD DT9739.  
TRIM PER MOULD LEAVING FINISHED EDGE.

**PRELIMINARY ISSUE**

*SC* 11.04.05

DESIGN	<i>SC</i>	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	<i>SC</i>		
CHECKED		DRAWING NO. <b>D4380</b>	REV. PA9
MFG. APPR.			SHEET 5 OF 19
APPROVED		TITLE <b>CEILING POCKETS</b>	SCALE NTS
DE APPR.		COPYRIGHT © 2011 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE REPRODUCED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	
DATE	11.04.05		

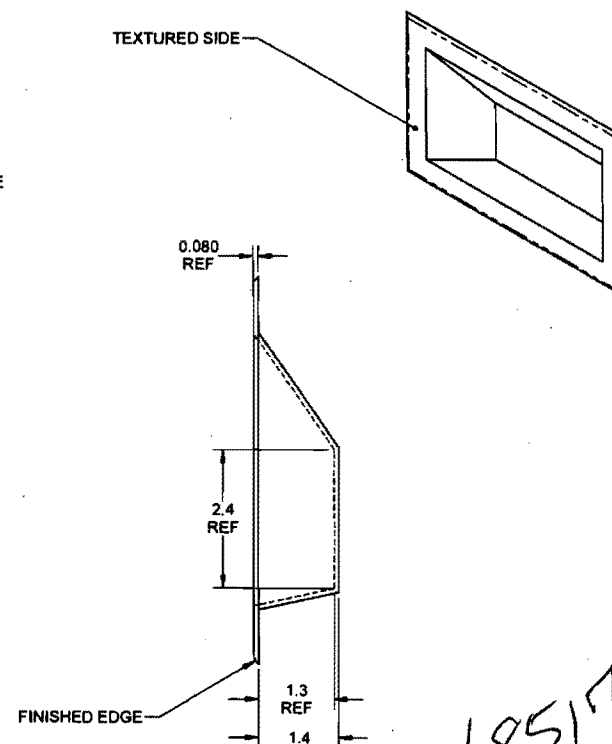
W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries



68517

RELEASED  
2011-05-10

1) MATERIAL: KYDEX 6185, 0.080 THICK, P3-VELOUR MATTE, IVORY #62015  
REF DART SPEC MKYD6185S.080-P3-62015

- 2) FINISH: NONE  
3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED  
4) UNITS: INCHES UNLESS OTHERWISE NOTED  
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX  
6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4  
7) WEIGHT: 0.33 lbs  
8) MINIMUM ALLOWABLE THICKNESS AFTER THERMOFORMING = 0.040  
9) TOOLING: THERMOFORM PER MOULD DT9739 AND DART QSI 022  
10) TRIM PER MOULD LEAVING FINISHED EDGE  
11) MAXIMUM INSIDE RADIUS = 0.188

DESIGN	<i>02</i>	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA  DRAWING NO. <b>D4380</b>  TITLE <b>CEILING POCKETS</b>  COPYRIGHT © 2011 BY DART AEROSPACE LTD NO PART OF THIS DOCUMENT IS TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT PERMISSION IN WRITING FROM DART AEROSPACE LTD.	REV. <i>1</i>
DRAWN	<i>02</i>		SHEET 5 OF 1
CHECKED	<i>02</i>		SCALE
MFG. APPR.	<i>02</i>		MTS
APPROVED	<i>02</i>		
DE APPR.	<i>02</i>		
DATE	11.04.21		

